



Screening Tool for Evaluating Risk of Ebola Virus Exposure August 29, 2014

Name:	
Affiliation:	
Residence:	
Date of Birth:	

In the past 21 days has the person:	NO	YES
Traveled to, or in, an involved area (see: http://wwwnc.cdc.gov/travel/diseases/ebola)		
If no, patient is at NO RISK, no further action required		↓
Had exposure to an ill person or wild animals while in an involved area		
If no, patient is at NO RISK, no further action required		↓
Worked or volunteered in a facility with Ebola virus disease (EVD) patients		
Household member, friend or acquaintance with confirmed/suspected EVD		
If yes to either of these, patient is at risk, proceed to questions below		↓
1. Direct exposure to someone ill with EVD or their blood or body fluids, without personal protective equipment (PPE)		
2. Unprotected, direct exposure to someone who died with EVD		
3. Unprotected direct contact with animals that may have Ebola virus infection		

If No to all of the 3 numbered questions above, patient is at LOW RISK and only fever/symptom monitoring is required.

If Yes to any of the 3 numbered questions patient is at HIGH RISK and quarantine and fever/symptom monitoring required. Please contact public health department immediately (in Boston: BPHC at 617-534-5611; outside Boston: MDPH at 617-983-6800).

See MDPH/BPHC guidance "Clinical Advisory: Management of Suspected Ebola Virus Cases or Contacts".
(at: <http://www.mass.gov/eohhs/docs/dph/cdc/advisories/ebola-advisory-08-01-14.pdf> and
http://www.bphc.org/whatwedo/infectious-diseases/Documents/EbolaUpdatedadvisory080714_FINAL.pdf)